

497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

CITY CLERK

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497 CONTRIBUTION REPORT

NAME OF FILER Ara Najarian		Date of This Filing 3-20-13	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 818-549-0808	I.D. NUMBER (if applicable) 1272875	Report No. _____		
STREET ADDRESS 500 N. Central Ave, #940		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Glendale	STATE Ca	ZIP CODE 9120	No. of Pages _____	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
3-20-13	Armen Norhadian 1759 Allen Ave Glendale, Ca 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self employed property Management	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
3-20-13	Velvet Hammer Music Inc 16000 Ventura Blvd., Ste 600 Encino, Ca 91436	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

*Contributor Codes

IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Reason for Amendment: _____